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PTO/SB/05 (3-01)
Approved for use through 10/31/2002. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>	Attorney Docket No.	Knapé & Vogt P86US
	First Inventor	RUSSELL, Robert
	Title	STORAGE CONTAINERS AND ORGANIZERS FOR LAZY SUSANS
	Express Mail Label No.	EV 124388962 US

03913 U.S. PTO
10/646404
08/22/03


APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington DC 20231
1. <input checked="" type="checkbox"/> *Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i>	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i>
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>
3. <input checked="" type="checkbox"/> Specification [Total Pages <u>21</u>] <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none">- Descriptive title of the invention- Cross References to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings <i>(if filed)</i>- Detailed Description- Claim(s)- Abstract of the Disclosure	a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification Sequence Listing on: <ul style="list-style-type: none">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); orii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statement verifying identity of above copies
4. <input checked="" type="checkbox"/> Drawing(s) <i>(35 U.S.C. 113)</i> [Total Sheets <u>9</u>]	ACCOMPANYING APPLICATION PARTS
5. <input type="checkbox"/> Oath or Declaration [Total Pages <u> </u>] <ul style="list-style-type: none">a. <input type="checkbox"/> Newly executed (original or copy)b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i>i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76.	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i>
	11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>
	12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
	13. <input type="checkbox"/> Preliminary Amendment
	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>
	15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>
	16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
	17. <input type="checkbox"/> Other: _____

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: _____
Prior application information: Examiner _____ Group/Art Unit _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	(Insert Customer No. or Attach bar code label here)	or <input checked="" type="checkbox"/> Correspondence address below	
Name	VARNUM, RIDDERING, SCHMIDT & HOWLETT LLP		
Address	P.O. BOX 352		
City	GRAND RAPIDS	State	MICHIGAN
Country	U.S.	Zip Code	49501
	Telephone	(616) 336-6000	Fax (616) 336-7000
Name (Print/Type)	Thomas L. Lockhart	Registration No. (Attorney/Agent)	29,324
Signature		Date	8/22/03

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16367 U.S. PTO
08/22/03
FE TRANSMITTAL
for FY 2001

Patent fees are subject to annual revision.

Complete if Known

Application Number 60/405,776
Filing Date 08/22/2002
First Named Inventor RUSSELL, Robert
Examiner Name
Group/Art Unit
Attorney Docket No. Knap & Vogt P86US

TOTAL AMOUNT OF PAYMENT (\$902.00)

METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number: 22-0257

Deposit Account Name: Varnum, Riddering, et al.

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

- ☐ Applicant claims small entity status See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
101	740	201	370	Utility filing fee	740.00
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	
SUBTOTAL (1)					(\$740.00)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
29	-20**= 9	18	162.00
Independent 3	-3***= 0	84	0.00
Claims			
Multiple Dependent			

**or number previously paid, if greater; For Reissues, see below

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
103	18	203	9	Claims in excess of 20	
102	84	202	42	Independent claims in excess of 3	
104	280	204	140	Multiple dependent claim, if not paid	
109	84	209	42	** Reissue independent claims over original patent	
110	18	210	9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					(\$162.00)

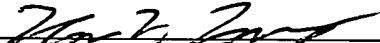
FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet.	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	219	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	240	126	240	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	
Other fee (specify)					
*Reduced by Basic Filing Fee Paid					
SUBTOTAL (3)					(\$)

SUBMITTED BY: VARNUM, RIDDERING, SCHMIDT & HOWLETT LLP

Complete (if applicable)

Name (Print/Type)	Thomas L. Lockhart	Registration No. (Attorney/Agent)	29,324	Telephone	616/336-6000
Signature		Date	8/23/03		

WARNING:

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant[s]: RUSSELL, Robert; ZOOK, Amy Louise; and WOLFSEN, Robert
 For: STORAGE CONTAINERS AND ORGANIZERS FOR LAZY SUSANS
 Serial No.: 60/405,776
 Filed: August 22, 2002

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

"Express Mail" Mailing Label No.:
 EV 124388962 US

Date of Deposit: August 22, 2003

Sir:

I hereby certify that the documents listed below are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

<input type="checkbox"/> Transmittal Form	<input type="checkbox"/> Declaration for Patent Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Check attached for \$	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Notice of Allowance and Issue Fee Due
<input type="checkbox"/> Provisional Application for Patent Cover Transmittal <input type="checkbox"/> Specification ___ Pages <input type="checkbox"/> Claims ___ Pages	<input type="checkbox"/> Information Disclosure Cover Letter <input type="checkbox"/> IDS PTO 1449 <input type="checkbox"/> ___ References	<input type="checkbox"/> Certificate of Correction
<input checked="" type="checkbox"/> Design/Utility Application Transmittal <input checked="" type="checkbox"/> Specification 15 Pages <input checked="" type="checkbox"/> Claims 6 Pages	<input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> ___ References	<input type="checkbox"/> Maintenance Fee Transmittal Form <input type="checkbox"/> Maintenance Fee Payment
<input type="checkbox"/> PCT <input type="checkbox"/> Transmittal Letter to the United States Receiving Office <input type="checkbox"/> PCT Fee Calculation Sheet <input type="checkbox"/> PCT Request (___ Pages) <input type="checkbox"/> PCT General Power of Attorney Cover Letter <input type="checkbox"/> PCT General Power of Attorney	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Letter to Official Draftsman	<input checked="" type="checkbox"/> Itemized Postcard
<input type="checkbox"/> Request Transmittal (RCE or CPA)	<input type="checkbox"/> Response to Missing Parts /Incomplete Application	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	
<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> Request for Refund	

Dated: 8-22-03

Alfonso Danhyer

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